Gazette Opinion: Lack of health insurance a drag on state economy

Montana has about 170,000 residents without health insurance. That hurts all of us. It shifts costs to those with insurance, pushes more people to hospital emergency rooms, results in expensive delays in care and causes workers to miss work.

All Montanans 65 and over have coverage with Medicare. But one in five of those under 65 have no health coverage. According to recent research by Steve Seninger, an economist with the University of Montana, among Montanans too young for Medicare:

- Fifty-eight percent have coverage through an employer.
- Ten percent have individual policies.
- Nineteen percent have Medicaid or Children's Health Insurance Program (CHIP).
- Twenty-two percent have no coverage at all.
- Sixteen percent of children (age 18 and younger) have no health insurance.

Why does Montana have one of the highest uninsured rates among the states? Why has the percentage of Montana children without coverage increased while the national rate has declined?

Surveys by Seninger shed some light. Nearly all employers surveyed with 100 or more workers offered coverage, but only 40 percent of businesses with five or fewer employees offered insurance. The majority of those who didn't cited high cost as the reason.

Montana is a small business state. Figuring out how to hold down health care and insurance costs for small businesses and their workers is key to addressing our uninsurance problem.

The Insure Montana program, championed by state Auditor John Morrison and approved by the 2005 Legislature, now provides subsidized coverage through an insurance pool or tax credits to workers for nearly 1,300 small businesses in Montana. Altogether, about 7,200 workers and family members are covered in the Insure Montana programs.

Insure Montana is chipping away at the access and affordability problem. But it won't cover all the uninsured. A much broader approach is needed. Every law, every regulation, every public health spending decision must be designed to:

- Avoid unnecessary costs
- Mandate accountability
- Reward quality
- Encourage prevention.

Encourage early intervention.

In addition to being director of the Bureau of Economic Research at UM, Seninger is director of Montana Kids Count. He's done considerable research on the economics of CHIP and Medicaid for needy children. In Illinois, for example, where a new initiative aims to provide health coverage to every child, the state projects a savings of 70 percent on its health care spending.

The Montana Legislature must act to reverse the trend toward no insurance. Covering kids is a place to start. Legislation has been proposed in this session to slightly increase the eligibility limits, to increase the dental benefit now capped at \$350 annually and to cover pregnant women. All three measures are steps in the right direction that require beefing up the state's CHIP funding.

As U.S. Sen. Max Baucus said in a national teleconference last week, "We have to find ways to get more and more Americans covered."

The uninsured suffer, but we all pay. In the big picture, all of us are all in this health system together.